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PATENT

Total Pages

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
**UTILITY PATENT APPLICATION TRANSMITTAL**

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: **Turney et al.**TITLE: **MECHANICAL METAPHOR FOR REPRESENTING PARAMETER CONSTRAINTS GRAPHICALLY FOR MEDICAL DEVICES**

**CERTIFICATE UNDER 37 CFR §1.10:** I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Box Patent Application, Commissioner of Patents, Washington, D.C. 20231, "EXPRESS No. EV 019 705 713 US, on this 28th day of December, 2001.

PTO  
10/034132  
10/034132  
12/28/01



Molly Chlebeck

Printed Name

Signature

Commissioner for Patents  
**BOX PATENT APPLICATION**  
 Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

☒ **Patent Application Transmittal**☒ **Specification:****Total pages:** 13 (including claims and abstract: Spec. 10 sheets; Claims 2 sheets; Abstract 1☒ **Drawings:**Total sheets: 7☐ formal ☐ informal**Combined Declaration and Power of Attorney:**

- ☒ unexecuted  
☐ copy from prior application  
☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))  
☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

**Accompanying application parts:**

- ☐ Notification of filing a  
☐ Assignment of the Invention to Medtronic, Inc.  
☐ Assignment cover sheet  
☐ Information Disclosure Statement  
☐ PTO Form 1449  
☐ Copies of IDS citations  
☐ Preliminary Amendment  
☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.  
☒ Return Postcard

**IF A CONTINUING APPLICATION:**

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)  
 of prior application No.        /       .
- ☐ Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation  
☐ division ☐ continuation in part of application number       , filed       .
- ☐ Cancel in this application original claims        of the prior application before calculating the filing fee.  
 (At least the original independent claim must be retained for filing purposes.)
- ☐ The prior application is assigned of record to Medtronic, Inc.
- ☐ The Power of Attorney in the prior application is to:       .

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/258,728, filed December 29, 2000.

☒ Address all future correspondence to: Girma Wolde-Michael, Reg. No. 36,724  
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FEE CALCULATION	No. of Claims			No. of Extra Claims	Rate	Fee
	Filed	Claims Included in Base Fee				
Total Claims	12	20	=	0	x 18	0.00
Independent Claims	3	3	=	0	x 84	0.00
Multiple Dependent Claims				0	+ 280	
Basic Filing Fee						\$740.00
					TOTAL	740.00

Charge Deposit Account No. 13-2546 the amount of **\$740.00**.

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

12/26/01  
Date

  
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